PTO/SB/22 (10-04) Approved for use through 7/31/2006. OMB 0651-0031

The provided Reduction Act of 1985, no persons are required to exponed to a collection of information unless if displays a vair OMB content number	110.	ider the Park Spork Reduction Act of 19	95 no nersons are requi	U.S. Patent and	Trademark Office; U.S	S. DEPARTMENT	OF COMMERCE
Application Number Ogl/445328 Filed December 7, 1999	PET.						
Application Number 09/445328 Filed December 7, 1999 For THERAPIES FOR ACUTE RENAL FAILURE Art Unit 1647 Examiner D. S. Romeo This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): Fee Small Entity Fee X One month (37 CFR 1.17(a)(1)) \$110.00 \$55.00 \$110.00 Two months (37 CFR 1.17(a)(2)) \$430.00 \$215.00 \$ Three months (37 CFR 1.17(a)(3)) \$980.00 \$4490.00 \$ Four months (37 CFR 1.17(a)(4)) \$1,530.00 \$765.00 \$ Five months (37 CFR 1.17(a)(5)) \$2,080.00 \$1,040.00 \$ Applicant claims small entity status. See 37 CFR 1.27. A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 18-1945 I have enclosed a duplicate copy of this sheet. I am the applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). attorney or agent or dunder 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). To Date Ignacio Perez de la Cruz Typed or printed name Telephone Number Income Signature I		F	2005		J	JJ-P01-514	
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identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): Fee	Art U	Init 1647			Examiner	D. S. Ro	meo
Small Entity Fee Small Entity Fee	ident	ified application.					
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X Total of forms are submitted.	th	OTE: Signatures of all the inventors of an one signature is required, see below	assignees of record of t v.	nie enine interest of their repr	escindavo(s) are require	ou. oubline maidph	
	Γx	Total of 1	forms are sub	omitted.			
							

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. ED 181235298 US, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

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PTO/SB/17 (10-04v2)

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		Complete if Known					
FEETRANSMITTAL	.]	Application Number 09/445328					
for EV 200E	l				December 7, 1999	•	
for FY 2005	ľ				ntor	Kuber T. Sampath	
Effective 10/01/2004. Patent fees are subject to annual revision.					D. S. Romeo		
Applicant claims small entity status. See 37 CFR 1.27	ŀ	4047					
TOTAL AMOUNT OF PAYMENT (\$) 110.00		Art Ur Attorn		cket No	111 504 544		
		FEE CALCULATION (continued)					
METHOD OF PAYMENT (check all that apply) Credit Money	3. ADDITIONAL FEES						
Check Card Order Other None	3. A	DDITIO	ONAL	FEES			
X Deposit Account:							
Deposit Account 18-1945	Large Fee	Large Entity Small Entity Fee					
Account 18-1945 Number	Code	(\$)	Code	(\$)		Fee Description	Fee Paid
Deposit Account Ropes & Gray LLP	1051	130	2051	65	Surcharg	e – late filing fee or oath	
Name	1052	50	2052	25		e – late provisional filing fee or cover	
The Director is authorized to: (check all that apply)					sheet.		<u> </u>
X Charge fee(s) indicated below X Credit any overpayments	1053	130	1053	130	Non-Engl	ish specification	
X Charge any additional fee(s) or any underpayment of fee(s)	1812	2,520	1812	2,520	-	request for ex parte reexamination	
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1804	920*	1804	920*	Requestin	ng publication of SIR prior to	i
to the above locatimed deposit decount	1805	1,840*	1805	1.840*	Requesti	ng publication of SIR after	
	1803	1,040		1,040	Examiner	action	
FEE CALCULATION	1251	110	2251	55		for reply within first month	110.00
1. BASIC FILING FEE	1252	430	2252	215		for reply within second month	
Large Entity Small Entity Fee Fee Fee Fee Fee Fee Paid	1253	980	2253	490		for reply within third month	
Code (\$) Code (\$)	1254	1,530	2254	765	Extension for reply within fourth month		
1001 790 2001 395 Utility filing fee	1255	2,080	2255		Extension for reply within fifth month		
1002 350 2002 175 Design filing fee	1401 1402	340 340	2401	170 170	Notice of Appeal		
1003 550 2003 275 Plant filing fee	1402	300	2402	150	Filing a brief in support of an appeal		
1004 790 2004 395 Reissue filing fee	1451	1,510	1451		Request for oral hearing Petition to institute a public use proceeding		
	1452	110	2452	55		revive – unavoidable	
SUBTOTAL (1) (\$) 0.00	1453	1,370	2453	685		revive - unintentional	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501	1,370	2501	685	Utility issu	ue fee (or reissue)	
Extra Fee from	1502	490	2502	245	Design is	sue fee	
Total Claims below Fee Paid Total Claims -** =	1503	660	2503	330	Plant issu	ie fee	
Independent	1460	130	1460	130		to the Commissioner	
Claims — — — — — — — — — — — — — — — — — — —	1807	50	1807	50	Processi	ng fee under 37 CFR 1.17(q)	
Multiple Dependent =	1806	180	1806	180		on of Information Disclosure Stmt	
Large Entity Small Entity Fee Fee Fee Fee Fee Fee					Recording	g each patent assignment per	
Code (\$) Code (\$)	8021	40	8021	40	property (times number of properties) ubmission after final rejection	
1202 18 2202 9 Claims in excess of 20	1809	790	2809	395	(37 CFR		
1201 88 2201 44 Independent claims in excess of 3 1203 300 2203 150 Multiple dependent claim, if not paid	1810	790	2810	395		additional invention to be	
1203 300 2203 150 Multiple dependent claim, in not paid	1801	790	2801	395	examined (37CFR 1.129(b))		
over original patent	1802	900	1802	900	Request	for expedited examination	
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent		fee (spe	I		ot a desig	gn application	

**or number previ	SUBTOTAL (2) (\$) 0.00 ously paid, if greater; For Reissues, see above	*Reduced by Bas	ic Filing Fee Paid	SUBTO	TAL (3) (\$) 110.00
SUBMITTED BY				(Complete	(if applicable))
Name (Print/Type)	Ignacio Perez de la Cruz	Registration No. (Attorney/Agent)	55,535	Telephone	(212) 497-3613
Signature	Inhhhhh			Date	November 12, 2004

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Ex in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Ale	press Mail, Airbill No. ED 181235298 US, exandria, VA 22313-1450, on the date
shown below.	
Dated: November 12, 2004 Signature: Sinda Blabe (Linda	a Blake)